TIFICATE OF ASSUMED BUSINESS NAME (Please type or print legibly. See instructions on reverse.) To the SECRETARY OF STATE, STATE OF IDAHO Pursuant to Section 53-504, Idaho Code, the undersigned gives notice of adoption of an Assumed Business Name. 1. The assumed business name which the undersigned use(s)dn the transpiction of business is: Parallel - 1 BM 2. The true name(s) and business address(es) of the entity or individual(s) doing business under the assumed business name is/are: Complete Address 82501 Lebresley 739 Orudan LBM - Reizhold MOSTISON *PARALLEL-Kirk Lebresley 739 Bry den RONHOLD BAER, JOHN ESCANILLA 3. The general type of business transacted under the assumed business name is: (mark only those that apply) Retail Trade Manufacturing Transportation and Public Utilities Wholesale Trade Agriculture Finance, Insurance, and Real Estate Services Construction Mining 4. The name and address to which future Phone number (optional): 798-8394 correspondence should be addressed: PARALLEL RELORDS - Kirk Lebros ley Submit Certificate of Assumed Business 739 Bruden Ac. Name and \$20,00 fee to: KW15to 1ID 83501 Secretary of State 700 West Jefferson 5. Name and address for this acknowledgment Basement West COPY IS (if other than #4 above): PO Box 83720 Boise ID 83720-0080 208 334-2301 Secretary of State use only

Printed Name: Kirk Le Gres ley

Capacity: PARTNER

(see instruction # 8 on back of form)

IDAHO SECRETARY OF STATE

01/05/1999 09:00 CK: 5165 CT: 189861 BH: 175575

1 8 20.06 = 20.08 ASSUM NAME # 2

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